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Examiner Signature	/Michael Fialkowski/	Date Considered	01/05/2009
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Substitute for form 1449B/PTO Supplemental <b>INFORMATION DISCLOSURE          STATEMENT BY APPLICANT</b>  <i>(Use as many sheets as necessary)</i>				<b>Complete If Known</b>	
				Application Number	
				Filing Date	
				First Named Inventor	Arnd Paulsen
				Art Unit	
				Examiner Name	
				Attorney Docket Number	PD040024
Sheet	2	of	2		

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Examiner Signature	/Michael Fialkowski/	Date Considered	01/05/2009
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